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JUN 21 2005

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26259 7590 05/12/2005

LICATLA & TYRRELL P.C.
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06/28/2005 FFANAIAS 00000086 10039272

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Jane Massey Licata

(Depositor's name)

Jane Massey Licata

(Signature)

June 23, 2005

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/039,272	10/20/2001	Pranela Rameshwar	267/033	8309

TITLE OF INVENTION: HEMATOPOIETIC GROWTH FACTOR INDUCIBLE NEUROKININ-1 GENE

(UMD-0055)

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional	YES	\$700	\$300	\$1000	08/12/2005
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EXAMINER	ART UNIT	CLASS-SUBCLASS
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FETTEROLF, BRANDON J	1642	424-001490
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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Licata & Tyrrell P.C.

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2

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

University of Medicine and Dentistry of New Jersey

New Brunswick, New Jersey

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

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Authorized Signature *Jane Massey Licata*

Date **June 23, 2005**

Typed or printed name **Jane Massey Licata**

Registration No. **32,257**

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